Doc Code:

Approved for use through 07/31/2009. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Application Numbe	r	0/792,126							
TRANSMITTAL	Filing Date		03/04/2004							
FORM	First Named Invent	tor	ACCOMAZZI, Vittorio							
	Art Unit		2625							
(to be used for all correspondence efter initial	Examiner Name		AZARIAN, Seyed H.							
Total Number of Pages In This Submission	Attorney Docket Nu	umber	67647/00045							
ENCLOSURES (Check all that apply)										
Response to Missing Parts/ Incomplete Application	Petition to Provision Change of Chan	a) p-related Papers c Convort to a al Application Attorney, Revocation of Correspondence Add Disclaimer for Refund inher of CD(s) Landscape Table on C	_	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): 1) Transmittal of Psyment of Issue Fee (Large Entity); and 2) PTOL-85 (in duplicate).						
Reply to Missing Parts under 37 CFR 1.52 or 1.53				,						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm Name Blake, Cassels & Graydon LLP										
Signature										
Printed name John R.S. Orange										
Dale 1 DEC 05			Reg. No.	29,725						
CERTIFICATE OF TRANSMISSION/MAILING										
I hereby certify that this correspondence is being faceimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:										
Signature										
Typed or printed name		······································	Date							

This collection of Information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the arrount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

=DEC. 2.2005=10 TRANSMIT	3: 09AM====14168 TAL OF PAYME (37 C.)	632653 NT OF ISSUE F F.R. 1.311)	EE (Large	Entity)		4=P. 5=
Applicant(s): ACC	OMAZZI, Vittorio		DEC (2 2005		
Application No. 10/792,126	Filing Date 03/04/2004	Examine AZARIAN, Se	yed H.	Cuatomer No. 27871	Group Art Unit 2625	Confirmation No 3910
Invention: PERS	SPECTIVE WITH SE	IEAR WARP				
		COMMISSIONEI <u>P.O. Bo</u> <u>Alexandria, V</u>	ox 1450 A 22313-1	ENT8 450		
	# 1400,000		ned applica	tion.	Plant Fee:	
☐ A check in the ☐ The Director i ☐ as described ☐ Ch	e amount of is hereby authorized below. arge the amount of	\$1,700.00		ccount No.	02-255	3
☐ Payment by C	edit any overpaymen arge any additional f credit card. Form PTo nformation on this on this form. Provi	ee required. O-2038 is attached. form may become	public. Cr	edit card infor Id authorizatio	mation should n on PTO-2038	not
John R.S. Orang Blake, Cassels & Box 25, Commex 199 Bay Street, S Toronto, Ontario CANADA Tel: (416) 863-3 Fax: (416) 863-2	Signature ge (Reg. #29,725) a Graydon-LLP ree Court West Suite 2800 o M5L 1A9			1 DEC		
cc: Certif This ce	icate of Transmission b ortificate may only be u by deposit account	sed if paying		Certificate of M	ailing by First Cl	ass Mail
	document and authorize	ition to charge deposit	the Uni	ted States Postal S ail in an envelope a	correspondence is be Bervice with sufficient ddressed to "Commis VA 22313-1450" (37	nt postage as first
(Date)				(Dete)	_,	
	Signature			Signature of Per	san Mailing Correspo	ndence
Typed or Pri	nted Name of Person Signin	g Certificate	Typ	ed or Printed Name	of Person Mailing Co	orrespondence